I cannot imagine how. She said: I get by on it.

I checked into it, and I saw her the next morning before I checked out, and I said: Judie, under this bill we have, because you make less than \$14,000 a year as an individual, you will qualify for Medicaid. For the first time in your life, you will have health insurance under an Illinois State Medicaid Program that you won't have to pay for because you are in a low-income category.

Well, she said: That's great because I have diabetes.

Think about that: age 60, no health insurance, low income, no doctor regularly available to her.

And she said: And I've had a few lumps I would like to get checked out too.

I thought: This poor lady. She is a classic illustration of what we are talking about in this bill. She is not lazy. She is a hard-working person. She gets up every day at the crack of dawn to be there to make sure people feel right at home at that motel, and she has no health insurance.

Ninety-four percent of the people in this country will have health insurance—people like Judie, who, for the first time in her life, will have health insurance. Is that worth something? Is it worth something in America for us to take pride in the fact that we are expanding the peace of mind which some of us take for granted of having health insurance coverage?

I think it is worth a lot. I think it is important for us and the critics to step up and acknowledge they have never come forward with a single proposal to deal with that issue—not one. We have never heard from the Republican side of the aisle how they would cover 94 percent of the people in America. They have never put together a comprehensive health insurance plan. They have never talked about submitting it to the Congressional Budget Office to make sure it does as promised, as we have.

They come to the floor with criticisms of what we are trying to do. It is their right as Senators to do that. But it is also our right to ask them the basic question: Does the fact that you do not have a Republican health care reform bill mean that you like the current system, that you do not want to change it? That is one conclusion.

The other conclusion is: This is hard work. Writing a bill that does this takes a lot of time and effort, and they have not put in that hard work. So they come emptyhanded to the floor with good speeches and good graphs and good press releases, but without good amendments to take care of the basic problems.

There is one other element in this health care reform bill too. How many times have you met somebody in your family or at work or through a friend who told you about a battle they had with a health insurance company when somebody got sick in their family? I have run into it a lot. A few years

back, when I was a Congressman, in Springfield, they had a unique program where the Sangamon County State Medical Society would invite Members of Congress to accompany doctors on their rounds in a hospital.

The first time I was invited to do that, I called back and said: You've got to be wrong. You don't want me walking into a patient's room where you are talking about their private health situation.

They said: No, no, we ask permission. And it is interesting, people are bored in the hospital, and they are amused by politicians. So would you please come?

So I accompanied a doctor on his rounds. He was examining a nice lady in my hometown of Springfield, IL, who was suffering from vertigo, who had come to the hospital, and as a result of an x-ray, they discovered she had a tumor—a brain tumor—that needed to be removed. She lived by herself. She was falling down at home. He wanted to operate on her on Monday. This was a Friday. He wanted to keep her in the hospital because he was afraid if she went home she might fall, hurt herself, and he wanted her ready for surgery on Monday.

But before he could say to her: Be

But before he could say to her: Be prepared to stay over the weekend, he had to call her health insurance company. I stood next to this doctor at the nurses station in St. John's Hospital in Springfield, IL, as this doctor was arguing with a clerk at a health insurance company somewhere in a distant location about why this woman needed to stay in the hospital, and the clerk was saying: No, we are not going to pay for it. Send her home. Bring her back on Monday for the surgery.

He said: I'm not going to do that.

The clerk said: Well, we're not paying for it.

He hung up the phone and turned to me and said: She's staying in the hospital. We'll fight this out later on.

Fight it out—those battles, those fights take place every day across America.

I have told the story on the floor here about a friend of mine—a great friend of mine—whom I have known since he was a young man. He is a baseball coach at Southern Illinois University. His name is Danny Callahan. Danny has been battling cancer for years. Danny is a young guy. He has a young family and a good wife, and he is a terrific guy from a great family. He has been battling cancer—chemo, radiation, even surgery, removing part of his jaw and trying to stop this advance of cancer.

His oncologist came up with a drug that is working. It is called Avastin. This drug is experimental. It works on some cancers. It is certified to work on them. But they found it works on others in an off-label application. The oncologist wrote to the health insurance company and said: This is working. We have stopped the spread of his cancer. We want to keep using this drug. And they said: No. It costs \$12,000 a month, and we won't pay for it.

What is he going to do? You do not make a fortune as a baseball coach at Southern Illinois University. His family pitched in, borrowed some money to cover a month of treatment. He is going to have a trial in St. Louis at Barnes Hospital, connected with Washington University there. He is trying his best to keep this going, but he is battling this insurance company that said no.

This bill gives people whom I have described a fighting chance. It gives them a chance to fight against the discriminatory, wrong decisions of health insurance companies. Is that worth anything? Is it worth it? I have yet to see an amendment from the other side of the aisle that does this.

We used to call this a Patients' Bill of Rights, and it used to be a bipartisan issue. Senator John McCain joined with Senator Kennedy and the two of them worked on this, saying that patients in America should have the right to fight insurance companies that turn them down because of preexisting conditions, that turn them down because the cost of care is so high, that turn them down because they have lost their job or turn them down because their child reaches the age of 24. This bill provides protections for those people.

So when people say: I heard Governor Dean—I like him; Howard is a friend of mine; former Governor of Vermont; former head of the Democratic National Committee—wrote a big article in the Washington Post this morning and said: Vote against this bill. It is not everything I want it to be.

Well, Governor Dean, it is not everything I want it to be either. But how could we in good conscience explain to 30 million Americans who would have health insurance for the first time in their life—such as Judie down in Marion, IL—"Judie, I am sorry, we won't be able to get you health insurance this time around. We couldn't get everything we wanted." That is not a very compelling argument, from my point of view.

How do we say to people who want to have a fighting chance against insurance companies that say no—and will have the legal right to do that—"I am sorry, you are just going to have to continue to do your best fighting these clerks at health insurance companies who say no because this bill does not have everything in it that we want."

You learn in this business of life and politics that concessions and compromise are critical parts of achieving a goal. Within the Democratic Caucus there are conservative and liberal or progressive members, and we have to find that sweet spot, that middle ground, where they come together. I think we have, and I am sorry we do not have any Republican support for this.

It is a fact, though, we have spent an entire year debating health care reform on Capitol Hill, and the sum total of Republican support for health care reform by vote comes down to two. One